

1868

DATE: <u>11-31/80</u>	FROM: <u>WAGDON</u> (print name)
FORWARD TO: A. Art Unit: <u>2-774</u> B. Class: <u>345</u> C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED: <u>Input device</u>	

DATE: _____	FROM: _____ (print name)
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED: _____	

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER <div style="background-color: black; width: 100%; height: 50px;"></div>	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED: _____	

DISPOSITION BY 2700 CLASSIFICATION	
DATE: _____	CLASSIFIER: _____
FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____	REASON(S): A. You had Parent <input type="checkbox"/> (check box) B. See Title <input type="checkbox"/> (check box) C. See Abstract <input type="checkbox"/> (check box) D. See Claim(s): _____
FURTHER EXPLANATION IF NEEDED: _____	

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